AND S 3 1999 STATE

Attorney Docket No.: <u>PATENT</u> HELLO-00308

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Group Art Unit: 2747 #G/CMM
Bruce W. Stelman	Examiner: J. Saint Surin) Examiner: J. Saint Surin
Serial No.: 09/286,249	RESPONSE TO OFFICE ACTION MAILED JULY 20, 1999
Filed: April 5, 1999) MAILED JULY 20, 1999
For: SMART INTERFACE TECHNOLOGY) 260 Sheridan Avenue, Suite 420\) Palo Alto, CA 94306) (650) 833-0160
Assistant Commissioner for Patents Washington, D.C. 20231	TECEN AND NAV
Sir:	
The following is in response to the O	

AMENDMENTS

In the Claims:

Please cancel claims 1 and 59-62.

CERTIFICATE OF MAILING (37 CFR § 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington D.C. 20231

HAVERSTOCK & OWENS LLP.

Date: 8 20 44 BV: - AFRICA

- 1 -

Attorney Docket No.: HELLO-00308



HAVERSTOCK & OWENS LLP 260 Sheridan Ave., Suite 420 Palo Alto, California 94306 (650) 833-0160

In re Application of:

Bruce W. Stelman

Serial No.:

09/286,249 April 5, 1999

Filed: Entitled:

SMART INTERFACE TECHNOLOGY

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

(Col. 1)

(Col. 2)

(Col. 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	* 19	MINUS	** 24	0	18.00	0.00
Independent Claims	* 5	MINUS	*** 6	0	78.00	0.00
_ First Presentation Of Multiple Dependent Claim					240.00	

TOTAL

0.00

Small Entity 50% Filing Fee Reduction (if applicable)

0.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

 The "Highest Number Previously Paid For" (Total or Independent is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.)
- 1. X No additional fee is required.
- X Please charge any additional fees, including any fees necessary for extensions of time, or credit overpayment to Deposit Account No. <u>08-1275</u>. An originally executed duplicate of this transmittal is enclosed for this purpose.

Dated: August 20, 1999

Thomas B. Haverstock

Registration No.: 32,571

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on <u>August 20, 1999</u>.

Dated: August 20, 1999

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